

State of Washington  
Application for a Water Right



For Ecology Use  
Fee Paid 10<sup>00</sup>  
Date 7/16/01  
CK# 200576

Please follow the attached instructions to avoid unnecessary delays.

**Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM**

Name Marvin L. Estes Jr. Home Tel: (509) 877 - 2710  
Mailing Address 1983 Lombard Loop Rd Work Tel: ( ) -   
City Wapato State Wa Zip+4 98951 +   FAX: ( ) -

**Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION**

☐ Same as above

Name   Home Tel: ( ) -   
Mailing Address   Work Tel: ( ) -   
City   State   Zip+4   +   FAX: ( ) -   
Relationship to applicant

**Section 3. STATEMENT OF INTENT**

The applicant requests a permit to use not more than 300 (☒ gallons per minute or  
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s)  
of Irrigation during Drought. ATTACH A "LEGAL"  
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not  
sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year:

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From  / /  to  / /

**Section 4. WATER SOURCE**

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>2</u> well(s).
Number of diversions: <u> </u>	<u>reference G4-32043</u>
Source flows into (name of body of water):	Size & depth of well(s):

**LOCATION**

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	NE	5	11N	20	Yakima			
NW	NE	5	11N	20	Yakima			

For Ecology Use Date Received: July 16, 2001 Priority Date: July 16, 2001 YAKIMA  
SEPA: Exempt/Not Exempt FERC License #   Dept. Of Health #    
Date Accepted As Complete 07-16-2001 By   Date Returned   By   WRIA: 37



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: \_\_\_\_\_
- B. Briefly describe your proposed water system. (See instructions.)
- Both Wells have meters and will be record when used.*
- My Irrigation systems are tied in to the systems the well are connected to.*
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☐ NO  
PROVIDE DOCUMENTATION.

## Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: \_\_\_\_\_ Type of connection \_\_\_\_\_  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO  
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

**Complete C. and D. only if the proposed water system will have fifteen or more connections.**

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 30
- B. List total number of acres for other specified agricultural uses:
- Use all Orchard Acres 30
- Use \_\_\_\_\_ Acres \_\_\_\_\_
- Use \_\_\_\_\_ Acres \_\_\_\_\_
- C. Total number of acres to be covered by this application: 30
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:
- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
  - ‡ Acreage proposed to be irrigated under this application;
  - ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO  
If yes, enter permit no.: \_\_\_\_\_
- E. Farm uses:
- Stockwater - Total # of animals \_\_\_\_\_ Animal Type \_\_\_\_\_ (If dairy cattle, see below)
- Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☐ NO

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.*

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

## Section 10. REQUIRED MAP

- A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

- A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

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- B. Does the applicant own the land on which the water source is located? ☐ YES ☐ NO  
If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Marvin L. Edwards  
Applicant (or authorized representative)

7-13-01  
Date

\_\_\_\_\_  
Landowner for place of use (if same as applicant, write "same")

\_\_\_\_\_  
Date

*see other page for signatures.*

APPLICATION



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

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To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).



Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?  
☐ YES ☒ NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

**6. Remarks and Other Relevant Information:**

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

**7. Signatures:**

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

 (Applicant)	____/____/____ (Date)
 (Water Right Holder)	____/____/____ (Date)
 (Land Owner(s) of Existing Place of Use)	____/____/____ (Date)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

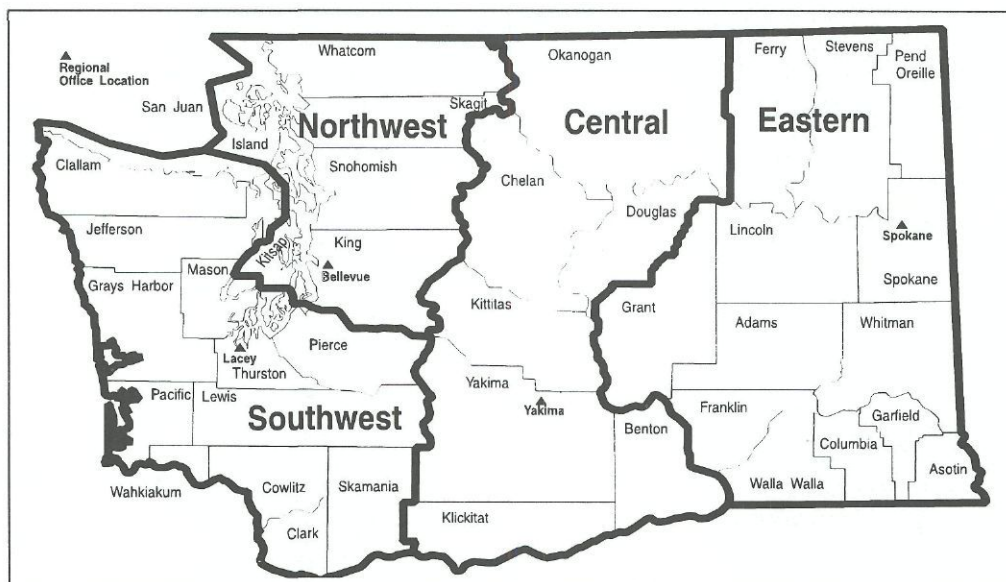
- |   |   |
|---|---|
| <input type="checkbox"/> APPLICATION FEE NOT ENCLOSED   | <input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE |
| <input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED | <input type="checkbox"/> SECTION _____ IS INCOMPLETE    |
| <input type="checkbox"/> OTHER/EXPLANATION: _____       |   |

STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



**IMPORTANT!**

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology  
Central Regional Office  
15 W. Yakima Avenue, Suite 200  
Yakima, WA 98902  
Telephone: (509) 575-2490

Department of Ecology  
Eastern Regional Office  
N. 4601 Monroe, Suite 202  
Spokane, WA 99205-1295  
Telephone: (509) 456-2926

Department of Ecology  
Northwest Regional Office  
3190 - 160<sup>th</sup> Avenue SE  
Bellevue, WA 98008-5452  
Telephone: (425) 649-7000

Department of Ecology  
Southwest Regional Office  
PO Box 47775  
Olympia, WA 98504-7775  
Telephone: (360) 407-6300

Persons of disability needing assistance in the application process or those needing this application in an alternate format, may call (360) 407-6607 (voice) or (360) 407-6006 (TDD).

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